

| CLAIMS ONLY | | | | | | | SERIAL NO. <div style="font-size: 1.2em; font-family: cursive;">10023755</div> | FILING DATE | | |
|--------------|----------|------|------------------------|------|------------------------|------|---|-------------|------|------|
| | | | | | | | APPLICANT(S) | | | |
| CLAIMS | | | | | | | | | | |
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| TOTAL IND. | 1 | | | | | | | | | |
| TOTAL DEP. | | 57 | | | | | | | | |
| TOTAL CLAIMS | | | | | | | | | | |

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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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